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PTO/SB/22 (12-04)

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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | | Docket Number (Optional) | |
|---|----------------------------------|------------|---------------------------------|----------------------|
| FY 2005 | | | 44471/294110 | |
| (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | Filed 10/31/2003 | |
| Application Number 107030,010 | | | | |
| For Transceiver Capable of Causing Series Resonance with Parasitic Capacitance | | | | Tron |
| Art Unit 2683 | | | Examiner Congvan Tran | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | |
| | | <u>Fee</u> | <u>Small Entity Fee</u> \$60 | s 120 |
| X | One month (37 CFR 1.17(a)(1)) | \$120 | • | |
| | Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ |
| | Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | s |
| | Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | s |
| | Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ |
| Applicant claims small entity status. See 37 CFR 1.27. | | | | |
| A check in the amount of the fee is enclosed. | | | | |
| Payment by credit card. Form PTO-2038 is attached. | | | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 11-0855 I have enclosed a duplicate copy of this sheet. | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | |
| I am the | applicant/inventor. | | | RECEIVED OIPE/IAP |
| assignee of record of the entire interest. See 37 CFR 3.71. | | | | |
| Statement under 37 CFR 3,73(b) is enclosed (Form PTO/SB/96). \(\infty\) \(\Gamma\) \(\Gamma\) \(\Gamma\) \(\Gamma\) | | | | |
| attorney or agent of record. Registration Number 40,339 | | | | |
| attorney or agent under 37 CFR 1.34. Registration number If acting under 37 CFR 1.34 | | | | |
| Grendal Galu 10.28 xco5 | | | | |
| Brenda O. Holmes404.815.6500 | | | | |
| Typed or printed name | | | Telephone Number | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | |
| Total of forms are submitted. | | | | |
| This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the | | | | |

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